PART B - FEE(S) TRANSMITTAL

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maintenance fee notificat		erwise in Block 1, by (c					HAIC PELS ADDRESS I
CURRENT CORRESPONDI	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
7278	7590 09/25	r	ave its own certificate	e or mail	ing or transmission.		
DARBY & DA P.O. BOX 770 Church Street St	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.						
New York, NY	ſ	(Depositor's name)					
			Ì				(Signature
							(Date
APPLICATION NO. FILING DATE			FIRST NAMED INVENT	OR	ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/540,376	01/17/2006		Dirk Nuber	***************************************	2094	11/0211439-US0	2736
TITLE OF INVENTION	: FLUIDIZED BED ME	THOD AND PLANT FO	R THE HEAT TREAT	MENT OF SOLIDS (CONTAI	NING TITANIUM	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	JE PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	12/28/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS				
SHEVIN, MARK L		1793	075-444000				941 Regi 9641 (PA) 1
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) Reel/Frame: 021463/0919 PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) OUTOTEC OYJ ESPOO, FINLAND							
Please check the appropr	iate assignee category or	categories (will not be n	rinted on the patent)	☐ Individual ☒ C	'omoratic	on or other private go	oun entity Governme
4a. The following fee(s) Issue Fee	are submitted; To small entity discount	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 04-0100 (enclose an extra copy of this form).					
**	s SMALL ENTITY state	us. See 37 CFR 1.27.	b. Applicant is no				
		uired) will not be accepte ites Patent and Trademark		an the applicant; a reg	istered a	ttorney or agent; or t	he assignee or other party
Authorized Signature	ER.	Liamo	`	Date	Dec	embor 2	909
Typed or printed nam	e Erik R. S		Registration	No4	10,833		
an application. Confiden	tiality is governed by 35 d application form to the ions for reducing this bu Virginia 22313-1450. DO	U.S.C. 122 and 37 CFR USPTO Time will vary	1.14. This collection is depending upon the i	estimated to take 12	minutes omment	to complete, including on the amount of ti	d by the USPTO to proces ng gathering, preparing, a me you require to comple partment of Commerce, P. for Patents, P.O. Box 145

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